

bichloride of methylene than with chloroform, but as I have not observed vomiting from the latter to be frequent when properly administered, I could see no difference in that respect. In the hospital, and out of it, I have used chloroform and ether indifferently; in long and tedious operations, generally inducing complete anaesthesia with chloroform, and continuing that condition with ether.

Not long ago attention was drawn in the columns of the medical press, and chiefly by Dr. R. J. Lewis in the *Philadelphia Medical Times*, to hydrobromic ether. I procured a quantity of Wyeth's of Philadelphia, and the results I shall briefly state to you.

It was administered, as I have been accustomed to administer chloroform, on a thick towel folded into a cone. The air was excluded as I have been accustomed, except in old persons, to exclude the air when giving chloroform or ether. But while never measuring the quantity of chloroform, nor watching the pulse, some attention was paid to these matters with the new anaesthetic, measuring the quantity and often noting the pulse.

I was first struck with the rapidity of action of the bromide as compared with that of ether or chloroform, in inducing complete anaesthesia; and more still with the suddenness of the return to consciousness. So sudden indeed was this return that it appeared to some of those present on certain occasions that the patient had not slept at all.

In only one case was there difficulty in inducing anaesthesia. Upon a stout muscular young man an attempt was too suddenly made, and without any warning by my assistant, to bring him under the influence of the bromide. Considerable cerebral excitement was manifested, and the violent muscular resistance offered rendered the proper application of the towel extremely difficult. This was the only exception to what was observed in all the other cases, and could have been easily avoided by making an equally rapid influence, but with a more thorough assent on the part of the patient—the greater ease with which this anaesthetic is inhaled facilitating its use. With the exception noted there was scarcely any emotion, and no struggling, save in the case of an infant, who

could form no appreciation of the ordeal to which it was being subjected. As is the case with other anaesthetics, there was increased rapidity of the heart's action, and greater general arterial tension, as Dr. Lewis terms it. With the increased frequency of the heart's action, there is, as might be supposed, increased frequency in respiratory movements, but less than with ether or chloroform; and less heaving than with the nitrous oxide gas.

In not one case have I noticed vomiting, and this alone would seem to give it a great advantage over chloroform, which, though occurring more frequently with the latter than it should, due in great measure to faulty administration, yet sometimes occurring notwithstanding every effort to prevent it.

The following notes of the exhibition of the new anaesthetic are not so complete as could be desired. They may be premised by stating that I was never accustomed to measure the quantity of chloroform or of ether administered to a patient; nor during the employment of either anaesthetic to pay any attention whatever to the pulse. Rarely if ever do I feel the pulse at the wrist or elsewhere, being firmly of opinion that when death does take place, the heart is always the *last* to register the untoward event.

In the trial of the bromide of ethyl I, for the most part, disregarded the pulse, but when noted it was recorded either by my colleague, Dr. Brunelle, or the *interne*, Mr. St. Jacques, or my student, Mr. Bastian, or myself, but not by them or by myself, and for the reason given, with anything approaching that exactness which obtained in Paris when the anaesthetic was undergoing trial there. The first trials were at the Hotel Dieu, then in the city, and also at Belœil.

1st. Mrs. P. M., æt. 26. Reduction of femoral hernia. 31.11.88. Bromide of Ethyl, (C<sub>2</sub>H<sub>5</sub>Br.) Complete anaesthesia in two minutes, which lasted seven minutes. Five seconds after I announced reduction, i. e., after removal of the anaesthetic, patient was perfectly conscious. Pulse was not noted in this case, but breathing was scarcely increased in frequency. No stertor; no vomiting; and the return to perfect and sudden consciousness was as quickly